

Application # _____

Harnett County Central Permitting
PO Box 66 Lillington, NC 27548 - Ph: 910-893-7625 - Fx: 910-893-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: TAMMY HEIN Phone: 910 514 5114
Owner (s) Mailing Address: 158 RANSOM LN. LILLINGTON

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: \$10530 Description of Work to be done: Mobile Home Style

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork Gas Piping _____ Other _____
Electrical: 200 Amp _____ <200 Amp _____ Service Change _____ Service Reconnect _____ Other _____
* For Progress Energy customers we need the premise number
Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington: _____

Subdivision: _____ Lot #: _____

Roll Mills will provide the Mechanical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 28290, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

Kind Heating & Air
Contractor's Company Name
232 Wilson Rd.
Address
28280
License #

9198953000
Telephone
Kindair1895@gmail.com
Email Address

Structure Owner / Contractor Signature: [Signature] # _____ Date: 3/21/22

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license

Application # _____

Harnett County Central Permitting
PO Box 65 Lillington, NC 27546 - Ph: 910-883-7525 - Fx: 910-883-2793 - www.harnett.org/permits
Certification of Work Performed By Owner/Contractor
(Individual Trade Application)

Owner (s) of Structure: TAMMY HEIN Phone: 9105145114

Owner (s) Mailing Address: 158 RANSAW LN. LILLINGTON

Land Owner Name (s): _____ Phone: _____

Construction or Site Address: _____

PIN # _____ Parcel # _____

Job Cost: #10530 Description of Work to be done: Mobile Homestyle Cabinet

Mechanical: New Unit With Ductwork _____ New Unit Without Ductwork Gas Piping _____ Other _____

Electrical: 200 Amp _____ <200 Amp _____ Service Change _____ Service Reconnect _____ Other _____
* For Progress Energy customers we need the premise number

Plumbing: Water/Sewer Tap _____ Number of Baths _____ Water Heater _____

Specific Directions to Job from Lillington: _____

Subdivision: _____ Lot #: _____

I, Vance Aust will provide the Electrical labor on this structure.
(Contractors Name) (Trade)

I am the building owner or my NC state license number is 32452, which entitles me to perform such work on the above structure legally. All work shall comply with the State Building Code and all other applicable State and local laws, ordinances and regulations.

VRA Electrical Telephone: 9193562225

Contractor's Company Name: _____ Address: _____
6401 Reeves Dr

Address: _____ License #: _____
32452

Structure Owner / Contractor Signature: Vance Aust Date: 3/21/22

By signing this application you affirm that you have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner you understand that you cannot rent, lease or sell the listed property for 12 months after completion of the listed work.

*Company name, address, & phone must match information on license